

# 2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 10, 2001 8:00 am  
Secretary of State

05-10-2001 90167 011 \*\*\*158.75

DOCUMENT # 332899

1. Entity Name

R.R. SIMMONS CONSTRUCTION CORPORATION

Principal Place of Business

~~3801 SUGAR PALM DR.~~  
TAMPA FL ~~33610~~

Mailing Address

3801 SUGAR PALM DR.  
TAMPA FL 33619

2. Principal Place of Business

14025 Riveredge DR

3. Mailing Address

14025 Riveredge DR.

Suite, Apt. #, etc.

Suite 550

Suite, Apt. #, etc.

Suite 550

City & State

Tampa FL

City & State

Tampa FL

Zip

33637

Country

Hills.

Zip

33637

Country

Hills.

6. Name and Address of Current Registered Agent

SIMMONS, R RANDOLPH III  
3801 SUGAR PALM DRIVE  
TAMPA FL 33619

7. Name and Address of New Registered Agent

Name Simmons, R. Randolph, III  
Street Address (P.O. Box Number is Not Acceptable)  
14025 Riveredge DR.  
Suite 550  
City TAMPA, FL FL Zip Code 33687

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  
(See criteria on back)

FILE NOW!!! FEE IS \$150.00  
After MAY 1, 2001 Fee will be \$550.00  
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	V	<input type="checkbox"/> Delete
NAME	SIMMONS, R RANDOLPH III	
STREET ADDRESS	927 N RIVERHILLS DRIVE	
CITY-ST-ZIP	TEMPLE TERRACE FL	
TITLE	V	<input type="checkbox"/> Delete
NAME	ZAVALLS, CESAR A	
STREET ADDRESS	18027 KINGS PARK DRIVE	
CITY-ST-ZIP	TAMPA FL 33647	
TITLE	VD	<input type="checkbox"/> Delete
NAME	SMITH, DARRELL L	
STREET ADDRESS	2720 BELL SHOALS ROAD	
CITY-ST-ZIP	BRANDON FL	
TITLE	DPST	<input type="checkbox"/> Delete
NAME	SIMMONS, LINDA O.	
STREET ADDRESS	927 N RIVERHILLS DRIVE	
CITY-ST-ZIP	TEMPLE TERRACE FL	
TITLE	V	<input type="checkbox"/> Delete
NAME	WEBSTER, MALINDA	
STREET ADDRESS	13015 ST FILAGREE DR	
CITY-ST-ZIP	RIVERVIEW FL 33569	
TITLE	V	<input type="checkbox"/> Delete
NAME	LANGER, LINDA W	
STREET ADDRESS	4141 BAYSHORE BLVD., #302	
CITY-ST-ZIP	TAMPA FL 33611	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	C	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Simmons, R. Randolph, III	CORRECT title
STREET ADDRESS	927 N. Riverhills Dr.	
CITY-ST-ZIP	Temple Terrace, FL 33617	
TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Zevallos, CESAR A.	CORRECT Spelling
STREET ADDRESS	18027 Kings Park Dr.	
CITY-ST-ZIP	Tampa, FL 33647	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*R. Randolph Simmons, President*

3/7/01

626-0506

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

632-1200

CR2E034 (10/00)